WORK-RELATED BURN SURVEILLANCE IN UTAH, 1999

November 30, 2000 Environmental Epidemiology Program Bureau of Epidemiology Utah Department of Health

EXECUTIVE SUMMARY

Work-related burns are a leading cause of occupational injury in the United States. Approximately 1.4 million persons in the United States sustain burns each year, of which approximately 54,000-108,000 are hospitalized. Work-related burns account for 20-25% of all serious burns, and approximately 6% of all work-related thermal burns occurred among adolescent workers aged 16-19 years. The data collected in Utah thus far comprise calendar years 1996-1999, however, case data for 1996 is not considered complete as the program first began collecting data in the fall of 1997. Data obtained prior to this time frame on work-related burns in Utah is limited, and the sensitivity of the data is poor. Additionally, three Utah hospitals have not yet reported data for 1999. When received, this data will be included in future annual reports.

This project is funded by a grant from the Centers of Disease Control and Prevention (CDC) and National Institute for Occupational Safety and Health (NIOSH). The Environmental Epidemiology Program, in which the grant is coordinated, continues to maintain the registry of work-related burn cases in Utah, and uses the information from cases to develop and implement intervention activities, help ensure that affected workers are identified and receive the appropriate medical and environmental follow-up, and ensure that appropriate prevention activities are directed toward targeted industries.

Hospital discharge data was received by the Utah Department of Health's, Bureau of Epidemiology under the authority of the Utah Injury Reporting Rule (R386-703). The Injury Reporting Rule requires that injuries be reported by hospitals to the Bureau of Epidemiology. Patient records containing one or more International Codes of Diagnosis, 9th Revision, Clinical Methods, (ICD-9) codes attributed to burns were then evaluated to determine if the burn injury was work-related.

The EEP examined the incidence of hospital admissions attributed to work-related burns that occurred in the state of Utah in 1999. During 1999, hospitals throughout Utah reported 323 hospital admissions that were attributed to burns. Of these reported burn-related injuries, 63 cases were work-related and 260 were non-work-related. The incidence of work-related burns in Utah for 1999 is 5.8 (Male: 9.2; Female 2.2). Incidence rates (crude) were calculated *per 100,000 population* and are based on Utah's 1999 estimated total workforce population.

The incidence for work-related burns is significantly higher among males than females, and relative to age groups, persons 45 - 54 years of age demonstrated the highest incidence of work-related burn injuries. Salt Lake County accounted for 44 percent of the total workforce population and was the largest contributor to work-related burn injuries accounting for just over 65% of the burns. Thursday is the day of the week most likely for a work-related injury to occur,

and October is the most likely month for an injury. Eating places accounted for most of the work-related burns, and college graduates were less likely to be burned on the job than non-college graduates.

In Utah, 1,844 burns (thermal, chemical and electrical) have been reported to the Utah Department of Health Work-Related Burn Injury Program comprising calendar years 1996 through 1999. The program began collecting data in the fall of 1997. Approximately 9% of all burn cases reported for calendar years 1996 through 1999 were work-related. Of the total 163 work-related burn cases reported in Utah for 1996-1999, 26% occurred among workers aged 16-24 years old, and 74% occurred among workers 25 years and older.

WORK-RELATED BURN SURVEILLANCE IN UTAH, 1999

November 30, 2000 Environmental Epidemiology Program Bureau of Epidemiology Utah Department of Health

INTRODUCTION

Work-related burns are the leading cause of injury in the United States (CDC, 1993). Approximately 1.4 million persons in the United States sustain burns each year, of which approximately 54,000 to 84,000 are hospitalized.

In October of 1997, the Environmental Epidemiology Program (EEP) established a registry of work-related burn cases in Utah. This project is funded by a grant from the Centers of Disease Control and Prevention (CDC) and National Institute for Occupational Safety and Health (NIOSH). The EEP maintains the registry of work-related burn cases in Utah, and uses the information from cases to develop and implement intervention activities. Interventions include education and consultation to employers where burn hazards are present, education for cases and workers, broader industry-wide studies, and research.

METHODS

Hospital discharge data was received from hospitals by the Utah Department of Health's, Bureau of Epidemiology under the authority of the Utah Injury Reporting Rule (R386-703). The Injury Reporting Rule requires that injuries be reported by hospitals to the Bureau of Epidemiology. Patient records containing one or more International Codes of Diagnosis, 9th Revision, Clinical Methods, (ICD-9) codes attributed to burns were then evaluated to determine if the burn injury was work-related. Medical records of each work-related case were abstracted to gather risk factor information such as personal identifiers, days hospitalized, employer, insurance, severity, and cause of injury regarding the work-related injury. The work-related burn injury data was then entered into the work-related Burn Injury Registry using EpiInfo 6.0 software.

Extraction of tabular data for all burns by county, age group, and gender was performed using the EpiInfo 6.0 software. All rates presented are crude rates calculated *per 100,000 population* unless otherwise specified and are based on Utah's 1999 estimated workforce population. Analysis of incidence rates was performed using Corel Quattro Pro 8. Workforce population estimates for age groups and gender for 1999 were obtained from the Utah Department of Workforce Services, Division of Workforce Information and Payment Services (UDOWS, 1999).

Surveys were mailed to those cases identified as work-related to obtain more detailed risk

factor and demographic information. Surveys were also mailed to employers when permission was granted by the cases. All survey data and data obtained from medical abstractions are entered onto EpiInfo 6.0 software for analysis. A bias in the analysis of data may be present as not all surveys are returned by cases. Additionally, medical records which are extracted do not always contain information for all categories desired.

RESULTS

There were 63 work-related burns reported in Utah during 1999. The incidence rate for work-related burns was significantly higher among males (9.2) than females (2.2). The incidence for both males and females was 5.8 per 100,000 (workforce) population in Utah. Of the 63 work-related burns reported, males accounted for 79 percent of the injuries in contrast to females who accounted for 21 percent of the injuries (Table 1, Appendix).

Relative to age groups, workers who were 25 - 44 years of age accounted for 52 percent of all work-related burns (Table 2). Thirteen percent of the work-related burns occurred among workers less than 19 years of age.

Relative to counties, 65 percent of all the work-related burns occurred in Salt Lake County. The counties demonstrating the next highest percent occurrence of work-related burns include Grand (7.9%), Sanpete (7.9%), Utah (6.4%), and Juab (6.4%) counties (Table 3). Salt Lake County accounted for 44 percent of Utah's workforce population, while 16% of the workforce population was accounted for in Grand (0.5%), Sanpete (0.8%), Utah (15.0%), and Juab (0.3%) counties (Table 4). The remaining counties accounted for 6 percent of the work-related burn injuries and 40 percent of the workforce population, respectively.

Data from the 1999 case questionnaires and medical abstracts completed indicate a wide variety of industries in which work-related burns occur. As noted from 1999 abstraction records and returned surveys, 29.6% of work-related burns occurred in Eating Places (SIC code 5812) as compared to 30.2% in 1998. The majority of cases were related to contact with hot food, grease, or beverage, or contact with the equipment used to heat food and/or beverages. The second highest percent of work-related burns (7%) during 1999 occurred in the Water, Sewer, Pipeline, and Communications and Power Line Construction Industry (SIC 1623). Additional industries noting work-related burns occurrence also compiled from questionnaires and abstraction records include: Electrical Work (SIC 1731) at 5%, and Primary Nonferrous metals (SIC 3339), Electrical Services (4911), Retail Bakeries (5461), and Skilled Nursing Care Facilities (8051) at 3% each. The balance of the work-related burns occurred in 28 various industries at one occurrence each. A more detailed account is tabulated in Appendix B from the questionnaires returned and abstraction of medical records for work-related burn injuries surveyed for 1999.

In 1999, 82% of those surveyed indicated that they were employed full-time when burned. Eighteen percent were part-time employees. Nineteen percent reported that they periodically perform the task associated with the injury, while 45% reported that they performed the task

associated with the injury on a daily basis. October was the month most likely for a work-related burn to occur (19%), and Thursday was the most likely day (22%). Sixty-nine percent of the reported work-related burns occurred between the hours of 7:00 a.m. and 3:00 p.m., the traditional day shift. Fifty percent of the work-related burn cases occurred to those who had some high school or had completed high school only, as compared to 50% who had completed high school and went on to complete two years of college. No college graduates were reported suffering from a work-related burn in 1999. Sixty-eight percent of the work-related burns were from a thermal source, 17% were from a chemical source, and 15% were from an electrical source. All work-related burn accidents involved only one person and 89% occurred inside a building. Eighty-seven percent of the cases reported that in their opinion, the burn accident could have been prevented, and 83% stated that they were aware of a written set of safety rules provided by the employer (See Case Questionnaire Summary Report in Appendix).

DISCUSSION

Surveillance of work-related injuries involves the enumeration, description and determinants of injuries in workplace populations. Surveillance is the scientific basis for prevention. Successful surveillance strategies depend on consistent case definitions and ascertainment strategies as well as standardized and comprehensive reporting mechanisms (Peek-Asa, Schaffer, et al, 1998). Without accurate and comprehensive case ascertainment, surveillance will underestimate the true number of events, which may lead to misidentification of high risk areas and activities associated with work-related burns.

Burn injuries represent a major complaint for patients presenting to emergency rooms in the US, with over a million visits annually. While the majority of burn injuries are not lifethreatening, major burns have a significant risk of mortality and morbidity. Less significant burns still carry a real risk of scar formation and compromise of function. Appropriate intervention activities to reduce the number of work-related burns can reduce untold mental and physical trauma to Utah workers by reducing the number of work-related burn injuries.

Work-related burns can be divided into three causal categories: thermal, chemical, and electrical. Thermal burns are caused by contact with hot objects, flames, or steam. Chemical burns are caused by contact with acids or bases. Electrical burns are infrequent, but can cause major damage. Electrons flowing abnormally through the body of a person produce injury and/or death by depolarizing muscles and nerves, by initiating abnormal electrical rhythms in the heart and brain, and by producing electrical burns by heating and by poration of the cellular membranes. The skin is the largest organ of the body and serves multiple functions essential to the survival of the individual. It plays a major role in thermal regulation and prevents fluid loss from evaporation. It is a barrier against infection and contains many of the sensory receptors that provide the nervous system with information about the environment. In case of a major burn, these functions are compromised. In Utah in 1999, 68% of the burns reported to the work-

related burn surveillance program were thermally caused, 17% were caused by contact with a chemical, and 15% were caused by contact with an electrical source.

This statewide surveillance project is the only system in Utah dedicated to collecting data and tracking injuries associated with work-related burns. The current focus of this project is to maintain the registry of work-related burn cases in Utah and to use the information from cases to develop and implement intervention activities. These activities include education and consultation to employers where burn hazards are present, education for work-related cases and workers in general, and broader industry-wide studies and research. Survey results returned to the Utah Department of Health from work-related burn cases indicate that 87% of the accidents were preventable in the opinion of the injured person, and 45% of those burned performed the task related to the burn daily. These statistics indicate that there is a need for continuing a focused work-related burn intervention strategy in the state.

Work-related burns are a leading cause of occupational injury in the United States. A substantial proportion of these burns occur among restaurant workers. Results of data collected by the Utah work-related burn surveillance project in 1999 indicate that the highest percent (29.6%) of work-related burns in Utah occurred in Eating Places (SIC code 5812). The majority of cases were related to contact with hot food or beverage, or contact with the equipment/materials (grease) used to cook food and/or beverages. The Utah Work-Related Burn Surveillance Program found that 33% of those burned in Eating Places (SIC code 5812) were 20 years of age or younger.

This evaluation observed that the sex-specific incidence rate for males was over four times the rate of females (Table 1) although U.S. Bureau of Labor statistics indicate that women account for only 45% of the Utah workforce population. Salt Lake County accounted for nearly two-thirds (65%) of all the work-related burn injuries (Table 3). This is primarily attributed to the fact that in 1999, Salt Lake County accounted for 44 percent of the workforce population in Utah (Table 4) (UDOWS, 1998).

CONCLUSION

During 1998, the Work-Related Burn Surveillance Project collected information on 63 work related burn injuries out of a total of 323 burns reported through hospital discharge reports. Analysis of the burn data suggests that there is a need for a focused work-related burn prevention program as 87% of those injured suggest that the burn accident could have been prevented, and 45% indicate that they were injured performing a task on which they work daily.

One of the goals of the Work-Related Burn Surveillance Program is to identify high risk populations in the State of Utah, and to develop intervention strategies to reduce the number and frequency of work-related burns. From the data collected in 1997, 1998, and 1999 certain high risk industries have emerged as prime candidates for targeted intervention activities. A

significant portion of the reported work-related burns continue to come from all types of eating establishments as indicated by surveillance data. A coordinated approach by UDOH and management personnel of eating establishments will need to be developed to address this trend.

REFERENCES

- CDC, Centers for Disease Control and Prevention, MMWR. *Occupational Burns Among Restaurant Workers-Colorado and Minnesota*. Vol. 42 No. 37, July 24, 1993.
- LCU, Labor Commission of Utah, Emlpoyer's First Report of Injury. Industrial Commission of Utah Statistics, 11/94 7/97.
- Peek-Asa, C., Schaffer, K. B., Kraus, J., and Howard, J. (1998). Surveillance of Non-Fatal Workplace Assault Injuries, Using Police and Employers' Reports. *Journal of Occupational and Environmental Medicine*. Vol. 40, NO. 8: 707-713.
- UDOWS, Utah Department of Workforce Services, Division of Workforce information and Payment Services (1997). *Total Employment in Utah by County*.
- Alson, Roy, Ph.D., Wright, Ronald K., MD., JD., Cox, Robert, MD., PhD., Thermal Burns, Chemical Burns, Electric Injuries, MEDLINE Search, World Wide Web.

APPENDIX A Summary of 1998 and 1999 Burn Injury Data

Table1. Crude incidence rates of work-related burn cases, total number of work-related burns,

total number of burns, and percent of total number of work-related burns in Utah by sex reported for 1998 and 1999.

BURN INJURIES IN UTAH BY SEX, 1998 -1999								
SEX	TOT NUMB BUI	ER OF	TOTAL NUMBER OF WORK- RELATED BURNS		% OF BURNS THAT ARE WORK- RELATED		^INCIDENCE OF WORK-RELATED BURNS	
	1998	1999	1998	1999	1998	1999	1998	1999
FEMALE	107	136	10	13	18	20.6	1.8	2.2
MALE	163	187	47	50	82	79.4	9.1	9.2
BOTH SEXES	270	323	57	63	100	100	5.4	5.8

[^]Crude incidence rates are calculated per 100,000 population based on Utah's 1998 and 1999 *total workforce* population.

Data Source: Burn injury data was obtained from the Utah Department of Health's, Bureau of Epidemiology from Databases of Hospital Admissions and Discharge Data under the authority of the Utah Injury Reporting Rule (R386-703)

Table 2. Crude incidence rates of work-related burn cases, total number of work-related burns, total number of burns, and percent of total number of burns in Utah by age-specific groups during 1998 and 1999.

BURN INJURIES IN UTAH BY AGE GROUPS, 1998-1999								
AGE GROUP	NUMB	ΓAL BER OF RNS	TOTAL NUMBER OF BURNS OF WORK- RELATED BURNS THAT WERE WORK- RELATED AINCIDENCE OF BURNS WORK- RELATED		OF BURNS THAT WERE WORK-		RELATED	
	1998	1999	1998	1999	1998	1999	1998	1999
0 - 14	60	72	0	0	0	0	0	0
15 - 19	16	28	3	8	5	13	2.6	6.5
20 - 24	24	26	11	7	19	11	8.0	4.8
25 - 34	44	57	14	17	25	27	6.6	7.6
35 - 44	40	50	15	16	26	25	6.7	6.8
45 - 54	29	39	12	12	21	19	7.5	7.1
55 - 64	15	24	1	3	2	5	1.2	3.3
65 +	42	27	1	0	2	0	0.8	0
All Groups	270	323	57	63	100	100	5.4	5.8

[^]Age-specific crude incidence rates are calculated per 100,000 population based on Utah's age-specific *total* workforce population for 1998 and 1999. Data Source: Burn injury data was obtained from the Utah Department of Health's, Bureau of Epidemiology from Databases of Hospital Admissions and Discharge Data under the authority of the Utah Injury Reporting Rule (R386-703).

Table 3. Crude incidence rates of work-related burn injury cases, total number of work-related burns, total number of burns, and percent of total number of burns in Utah by county during 1999.

	BURN INJURIES IN UTAH BY COUNTY, 1999								
COUNTY	^Incidenc e of WRB	Number of WRB	Total Number of Burns	% of Burns That are Work- Relate d	COUNTY	^Incidenc e of WRB	Number of WRB	Total Number of Burns	% of Burns That Are Work- Relate d
Beaver	0.0	0	1	0.0	Piute	0.0	0	1	0.0
Box Elder	0.0	0	6	0.0	Rich	0.0	0	0	0.0
Cache	2.3	1	4	1.6	Salt Lake	8.6	41	143	65.0
Carbon	10.3	1	7	1.6	San Juan	0.0	0	4	0.0
Daggett	0.0	0	0	0.0	Sanpete	56.6	5	32	7.9
Davis	0.0	0	9	0.0	Sevier	0.0	0	2	0.0
Duchesne	0.0	0	4	0.0	Summit	0.0	0	2	0.0
Emery	0.0	0	0	0.0	Tooele	0.0	0	4	0.0
Garfield	0.0	0	1	0.0	Uintah	0.0	0	4	0.0
Grand	93.8	5	31	7.9	Utah	2.5	4	28	6.4
Iron	6.7	1	3	1.6	Wasatch	0.0	0	1	0.0
Juab	111.3	4	21	6.4	Wash.	0.0	0	5	0.0
Kane	0.0	0	0	0.0	Wayne	0.0	0	0	0.0
Millard	22.4	1	2	1.6	Weber	0.0	0	8	0.0
Morgan	0.0	0	0	0.0	State of Utah	5.8	63	323	100.0

[^]Crude incidence rates are calculated per 100,000 population based on specific county's 1999 *total workforce* population. Data Source: Burn injury data was obtained from the Utah Department of Health's, Bureau of Epidemiology from Databases of Hospital Admissions and Discharge Data under the authority of the Utah Injury Reporting Rule (R386-703). WRB - Work-Related Burns

Table 4. Incidence of work-related burns, total number of workforce population, and percent of state workforce in Utah by county during 1999.

	WORKFORCE IN UTAH BY COUNTY, 1999 (Estimated)						
COUNTY	^Incidence of WRB	Total Number of Workforce	Percent of State Workforce	COUNTY	^Incidence of WRB	Total Number of Workforce	Percent of State Workforce
Beaver	0.0	2,338	0.2	Piute	0.0	537	0.05
Box Elder	0.0	18,470	1.7	Rich	0.0	956	0.09
Cache	2.3	44,065	4.1	Salt Lake	8.6	476,322	44.0
Carbon	10.3	9,710	0.9	San Juan	0.0	4,920	0.4
Daggett	0.0	417	0.04	Sanpete	56.6	8,827	0.8
Davis	0.0	117,954	10.9	Sevier	0.0	8,068	0.7
Duchesne	0.0	5,881	0.5	Summit	0.0	14,253	1.3
Emery	0.0	3,961	0.4	Tooele	0.0	11,794	1.1
Garfield	0.0	2,698	0.2	Uintah	0.0	10,662	1.0
Grand	93.8	5,330	0.5	Utah	2.5	163,077	15.0
Iron	6.7	14,883	1.3	Wasatch	0.0	6,227	0.6
Juab	111.3	3,594	0.3	Wash.	0.0	37,667	3.5
Kane	0.0	2,695	0.2	Wayne	0.0	1,419	0.1
Millard	22.4	4,463	0.4	Weber	0.0	99,235	9.2
Morgan	0.0	3,491	0.3	State of Utah	5.8	1,083,912	100.0

[^]Crude incidence rates for counties are calculated per 100,000 population based on Utah's 1999 *total workforce* population.

Data Source: Burn injury data was obtained from the Utah Department of Health's, Bureau of Epidemiology from Databases of Hospital Admissions and Discharge Data under the authority of the Utah Injury Reporting Rule (R386-703).

Data Source: Workforce population was obtained from the Utah Department of Workforce Services, Division of Workforce Information and Payment Services for 1999.

WRB - Work-Related Burns

Appendix B

Summary of 1998 and 1999 Case Questionnaire Data List of Utah Hospitals Reporting to Utah Department of Health

Industries of employment of work-related burn cases (from 1998-1999 abstracts):

Commercial Printing	Chemical Manufacturing	Metals Manuf.	Trucking
Electrical Power	Airplane Manufacturing	Industrial Machinery	Restaurant
Food Processing	Steel Mill	Hospital	Forest Service
Mining	Public Golf Course	Natural Gas Service	Oil Refining
Refining	University	Construction	Welding
Electronics	Waste Disposal	Food Service	Brewery
Airlines	Hotel	Public Schools	Railroad

Employment Status:

1998	Full Time: 93%	Part Time:	7%
1999	82%		18%

Length of Time in Occupation:

1998 Range 10 to 264 months, with a mean of 10.1 years

1999 Range 1 to 360 months, with a mean of 8.2 years

Length of Time at Position:

1998 Range 5 to 262 months, with a mean of 5.9 years

1999 Range 4 to 360 months, with a mean of 7.6 years

Frequency of Performing Task Associated with Injury:

	1998	1999
Daily for most of the day:	50%	45%
Once weekly:	14%	36%
Periodically:	28%	19%
Rare, or never before:	8%	0%

Demographics of Work-Related Burn Cases:

1998	Age range of 18 to 72 years, with a mean of 36 years
1999	Age range of 17 to 61 years, with a mean of 34 years

	1998	1999
Male:	82%	79%
Female:	18%	21%

Education: 1998 1999

Some high school:	7%	20%
High school graduate:	40%	30%
Two years of college:	40%	50%
College graduate:	13%	0%

Language:

1998 All English speaking

1999 73% English speaking9% Spanish speaking18% Other languages

Hospitalization Time:

1998 Range of zero to 51 days with a mean of 9.9 days

1999 Range of zero to 25 days with a mean of 1.5 days

Days of Work Missed:

1998 Range of zero to permanently
One fatality, Two cases injured permanently
Average 22.9 days for those hospitalized

1999 Range of zero to 90 days
No fatalities, no permanent injuries
Average 34 days for those hospitalized

Burn Injury Accident

Burn injury could have been prevented (opinion of victim):

1998 Yes: 83% No: 17%

1999 87% 13%

Burn injury occurred as the result of inadequate equipment:

1998 Yes: 34% No: 66%

1999 60% 40%

Employee was aware of written set of safety rules:

1998 Yes: 64% No: 36%

1999 83% 17%

Employer provides personal safety equipment for employees:

1998 Yes: 86% No: 14%

1999 80% 20%

Employer conducts safety training sessions for employees:

1998 Yes: 79% No: 21%.

1999 45% 55%

Frequency of safety training sessions: 1998 1999

 Infrequent or irregular:
 36%
 33%

 Weekly:
 14%
 0%

 Monthly:
 14%
 33%

 Biannually:
 14%
 0%

 None:
 22%
 33%

Location of burn injury event: 1998 1999

Outside of enclosure: Inside of enclosure:		25% 75%		11% 89%
Day of week of occurrence:	1998		1999	
Sunday:	7%		14%	
Monday:	21%		13%	
Tuesday:	14%		13%	
Wednesday:	7%		13%	
Thursday:	16%		22%	
Friday:	14%		14%	
Saturday:	21%		11%	

Time of day of occurrence (Ranging from 1:50 A.M. to 8:30 P.M.)

	1998	1999
Day shift (7-3:00):	60%	69%
Swing Shift (3-11):	33%	13%
Graveyard Shift (11-7):	7%	18%
Swing Shift (3-11):	33%	139

Month of the Year

	1998	1999		1998	1999		1998	1999
January	11%	10%	May	11%	3%	September	7%	6%
February	1%	3%	June	9%	5%	October	7%	19%
March	7%	14%	July	7%	8%	November	1%	13%
April	13%	3%	August	7%	8%	December	19%	8%

Number of workers injured per incident:

1998 1-85% of time
More than 1-15% of the time

1999 1-100% of time

Source of Burns	1998	1999
Thermal Source	67%	68%
Chemical Source	23%	17%
Electrical Source	10%	15%

Degree of Work-related Burns 1998 1999

1 st Degree Burn	9%	21%
2 nd Degree Burn	67%	55%
3 rd Degree Burn	24%	24%

UTAH HOSPITAL REPORTING NETWORK

Allen Memorial Hospital Gunnison Valley Hospital

Alta View Hospital University of Utah Intermountain Burn Center

American Fork Hospital Kane County Hospital

Bear River Valley Hospital LDS Hospital

Beaver Valley Hospital Logan Regional Hospital
Central Valley Medical Center McKay-Dee Hospital
Ashley Valley Medical Center Milford Valley Memorial Hospital

Ashley Valley Medical Center

Brigham City Community Hospital

Castleview Hospital

Orem Community Hospital

Lakeview Hospital

Mountain View Hospital

Jordan Valley Hospital

Jordan Valley Hospital

Ogden Regional Hospital Primary Childrens Medical Center St. Marks Hospital Salt Lake Regional Hospital

Cottonwood Hospital

Davis Hospital

San Juan Hospital

Sanpete Valley Hospital

Delta Community Hospital Sevier Valley Hospital Sevier Valley Hospital

Dixie Regional Medical Center Tooele Valley Regional Hospital

Fillmore Community Hospital Uinta Basin Hospital

Garfield Memorial Hospital Utah Valley Regional Medical Center